

A circular stamp from the Office of Intellectual Property and Economic (O.I.P.E.). The text "O.I.P.E." is at the top, "JC64" is at the top right, "AUG 02 2004" is in the center, and "PATENT &amp; TRADEMARK OFFICE" is at the bottom.

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

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**RECEIVED**  
AUG 05 2004  
Technology Center 2600

Sir:

I hereby certify that this correspondence is being deposited with the United States Postal Service as first-class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on

July 29, 2004

(Date of Deposit)

Ronald A. Clayton (Reg. No. 26,718)  
(Name of Attorney for Applicants)

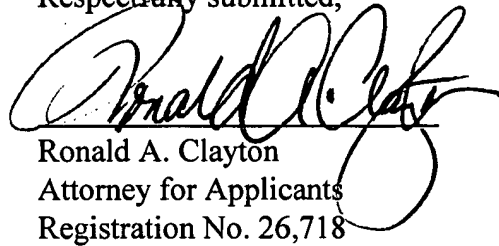
Signature \_\_\_\_\_

July 29, 2004

Date of Signature

Applicants' undersigned attorney may be reached in our New York Office by telephone at (212) 218-2100. All correspondence should continue to be directed to our address listed below.

Respectfully submitted,



Ronald A. Clayton  
Attorney for Applicants  
Registration No. 26,718

FITZPATRICK, CELLA, HARPER & SCINTO  
30 Rockefeller Plaza  
New York, New York 10112-3801  
Facsimile: (212) 218-2200

NY\_MAIN 443239v1



In re Application of:

CHARLES STEPHEN WILES ET AL.

Appln. No.: 09/718,413

Filed: November 24, 2000

For: IMAGE PROCESSING APPARATUS

Mail Stop Amendment  
Commissioner for Patents  
P. O. Box 1450  
Alexandria, VA 22313-1450

Sir:

Transmitted herewith is an amendment in the above-identified application.

☐ No additional fee is required.

The fee has been calculated as shown below

CLAIMS AS AMENDED						
	(2) CLAIMS REMAINING AFTER AMENDMENT		(4) HIGHEST NO. PREVIOUSLY PAID FOR	(5) PRESENT EXTRA	RATE	ADDITIONAL FEE
TOTAL CLAIMS	* 116	MINUS	** 120	= 0	x \$9 \$18	\$0
INDEP. CLAIMS	* 54	MINUS	*** 53	= 1	x \$43 \$86	\$86.00
Fee for Multiple Dependent claims \$145°/\$290						
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT---						\$86.00

Docket No. 01263.001797

Examiner: A. W. Carter

Group Art Unit: 2625

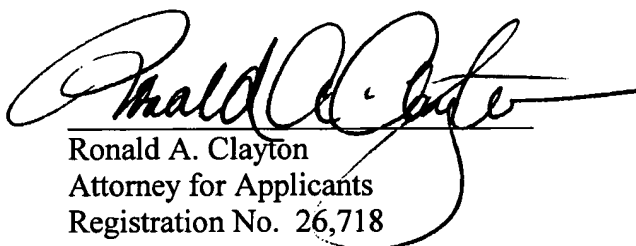
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- \* If the entry in Column 2 is less than the entry in Column 4, write "0" in Column 5.  
\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.  
\*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space.

- ☐ °Verified Statement claiming small entity status is enclosed, if not filed previously.
- ☒ A check in the amount of \$ 86.00 is enclosed.
- ☐ Charge \$\_\_\_\_ to Deposit Account No. 06-1205. A duplicate copy of this sheet is enclosed.
- ☒ Any prior general authorization to charge an issue fee under 37 C.F.R. 1.18 to Deposit Account No. 06-1205 is hereby revoked. The Patent and Trademark Office is hereby authorized to charge any additional fees under 37 C.F.R. 1.16 and 1.17 which may be required during the entire pendency of this application, or to credit any overpayment, to Deposit Account No. 06-1205.
- ☒ A check in the amount of \$ 110.00 to cover the Extension fee for response with a one -month extension is enclosed.
- ☐ A check in the amount of \$\_\_\_\_ to cover the Information Disclosure Statement fee is enclosed.
- ☒ Applicants' undersigned attorney may be reached in our New York Office by telephone at (212) 218-2100 or by facsimile at (212) 218-2200. All correspondence should continue to be directed to our address given below.

Respectfully submitted,

  
Ronald A. Clayton  
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